Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 1 of 61

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA, ROME DIVISION	-	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Kenneth First name Robert Middle name Wells Last name and Suffix (Sr., Jr., II, III)	Veronica First name Arleen Middle name Wells Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6832	xxx-xx-7200

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 2 of 61

Debtor 1 Debtor 2

Wells, Kenneth Robert & Wells, Veronica Arleen

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)			
	doing business as names	200.10000(0)	Submissi name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		603 Frazier Dr Dalton, GA 30721-3835				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Whitfield	0			
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 3 of 61

Debtor 1 Debtor 2 Wells, Kenneth

Wells, Kenneth Robert & Wells, Veronica Arleen

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under	2010)). /	Also, go to t		each, see <i>Notice Required by 11</i> d check the appropriate box.	U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Fo		
	choosing to the under	☐ Cha	oter 7					
		☐ Cha	oter 11					
		☐ Cha	oter 12					
		■ Cha	oter 13					
8.	How you will pay the fee	— al	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
				y the fee in installi Installments (Officia		sign and attach the Application for Individuals to Pay TI		
			•	•	only if you are filing for Chapter 7. By law, a judge may, b			
		no yo	ot required to our family si	o, waive your fee, a ze and you are unal	nd may do so only if your income	e is less than 150% of the official poverty line that applies. If you choose this option, you must fill out the <i>Applicati</i> .		
).	Have you filed for bankruptcy within the last 8 years?	■ No.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
0.	Are any bankruptcy cases pending or being filed by	■ No						
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
		☐ Yes.	Has yo	our landlord obtained	d an eviction judgment against yo	ou and do you want to stay in your residence?		
				No. Go to line 12.				
				Yes. Fill out Initial	Statement About an Eviction Ju-	dgment Against You (Form 101A) and file it with this		

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 4 of 61

	Document	Page 4 of 61	
Debtor 1 Debtor 2	Wells, Kenneth Robert & Wells, Veronica Arleen		Case number (if known)

art	Report About Any Bus	sinesses \	You Own as a Sole Propriet	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of bu	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, Sta	ate & ZIP Code			
	to this petition.		Check the appropriate bo	ox to describe your business:			
			☐ Health Care Busi	ness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as o	defined in 11 U.S.C. § 101(53A))			
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			☐ None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operations	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria dlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement o ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	pter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable		What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
				Number, Street, City, State & Zip Code			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 5 of 61

Debtor 1 Debtor 2

Wells, Kenneth Robert & Wells, Veronica Arleen

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 6 of 61

Debtor	1	
Dobtor	2	

Wells, Kenneth Robert & Wells, Veronica Arleen

Case number (if known)

Par 16.	t 6: Answer These Question What kind of debts do	16a.		ner debts? Consu	ımer debts are	defined in 11 U.S.C.§ 101(8) as "incurred by an			
	you have?		individual primarily for a personal, fa						
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe that	t are not consume	r debts or busin	ness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.					
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you paid that funds will be available to d			roperty is excluded and administrative expenses are			
	administrative expenses		□ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000			
	you estimate that you owe?	□ 50-99	ı	5001-10,000		<u> 50,001-100,000</u>			
		☐ 100-1 ☐ 200-9		□ 10,001-25,00	00	☐ More than100,000			
19.	How much do you	□ \$0 - \$		□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million		☐ \$1,000,000,001 - \$10 billion			
			.001 - \$500,000 .001 - \$1 million						
20.	How much do you	□ \$0 - \$		□ \$1,000,001 -		□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 □ \$100,000,00					
Par	7: Sign Below								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.							
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		relief in accordance with the chapte	er of title 11, Unite	d States Code,	, specified in this petition.				
		case can	and making a false statement, concern result in fines up to \$250,000, or imples, Kenneth Robert	aling property, or corrisonment for up to	to 20 years, or b	y or property by fraud in connection with a bankruptcy both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. eronica Arleen			
		Kennet	th Robert Wells e of Debtor 1		Veronica A	rleen Wells			
		Executed	November 4, 2016 MM / DD / YYYY		Executed on	November 4, 2016 MM / DD / YYYYY			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 7 of 61

Debtor	1	
Debtor	2	

Wells, Kenneth Robert & Wells, Veronica Arleen

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rob Rickman	Date	November 4, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Dala Dialaman		
Rob Rickman		
Printed name		
Rob Rickman		
Firm name		
1755 North Brown Rd Suite 200		
Lawrenceville, GA 30043		
Number, Street, City, State & ZIP Code		
		and Other world of Comment
Contact phone	Email address	rob@thegeorgialawfirm.com
604674		
Bar number & State		

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main

			Doc	cument	Page 8 of 61	0 1, 20 20.		
Fill in this inform	mation to identify your	case and this	s filing:					
Debtor 1	Kenneth Robert	Wells						
	First Name	Middle	Name		Last Name		}	
Debtor 2 (Spouse, if filing)	Veronica Arleen First Name		Name		Last Name		ļ	
United States Ba	ankruptcy Court for the:	NORTHER	N DISTI	RICT OF GEO	ORGIA, ROME DIVISION			
Case number _					_			☐ Check if this is an amended filing
							1	amenaea ming
Official Fo	rm 106A/B							
Schedul	le A/B: Prop	erty						12/15
information. If more Answer every ques	e space is needed, attach	a separate sh	eet to th	is form. On the	e are filing together, both ar e top of any additional page wn or Have an Interest In			
1. Do you own or h	, , , ,	e interest in ar	ny reside	ence, building,	, land, or similar property?			
Yes. Where is	is the property?							
1.1			What	is the propert	y? Check all that apply			
603 Frazie	er Dr			Single-family	home			ims or exemptions. Put diclaims on Schedule D:
	, if available, or other description	1		-	ılti-unit building n or cooperative			ns Secured by Property.
Dalton	GA 307	721-3835			d or mobile home		alue of the	Current value of the
City		ZIP Code		Land Investment pr	roperty	entire pro	perty? 55,824.00	portion you own? \$55,824.00
2.19				Timeshare Other	at in the property? Check one	Describe (such as f a life esta	the nature of your tenante), if known.	our ownership interest ancy by the entireties, or
				Debtor 1 only	1	Fee Sin	nple	
Whitfield				Debtor 2 only				
County					Debtor 2 only			munity property
					of the debtors and another you wish to add about this in ion number:	`	estructions)	
					rom Part 1, including any		pages	\$55,824.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 9 of 61

Car:			· · · · · · · · · · · · · · · · · · ·	
Пм	s, vans, trucks, tractors, sport util	ity vehicles, motorcycles		
_ 'V	lo			
■ Y	es			
			Do not deduct secured c	aims or exemptions. Put
3.1	Make:	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
	Model:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	Year:	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other information:	At least one of the debtors and another		
	2015 Dodge Ram	Check if this is community property (see instructions)	\$60,000.00	\$60,000.0
3.2	Make:	Who has an interest in the property? Check one		aims or exemptions. Put
O. <u>L</u>	Model:	■ Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 1 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another		
	1993 Mazda Protege	☐ Check if this is community property	\$200.00	\$200.0
L		(see instructions)		
3.3	Make:	Who has an interest in the property? Check one		aims or exemptions. Put ed claims on Schedule D:
	Model:	■ Debtor 1 only		ims Secured by Property.
	Year:	☐ Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
г	Other information:	At least one of the debtors and another		
	1993 Ford Z71	Check if this is community property (see instructions)	\$3,000.00	\$3,000.0
3.4	Make:	Who has an interest in the property? Check one		aims or exemptions. Put
	Model:	Debtor 1 only		ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another		
	2015 Nissa Rogue	☐ Check if this is community property (see instructions)	\$19,000.00	\$19,000.0

Official Form 106A/B Schedule A/B: Property page 2

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Page 10 of 61 Document Debtor 1 Wells, Kenneth Robert & Wells, Veronica Arleen Case number (if known) Debtor 2 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... \$2,000.00 Household Goods 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$500.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$500.00 **Jewelry** 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$3,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 11 of 61

	ebtor 1 ebtor 2 Wells, Kenn	eth Rol	oert & Wells, Veronica	A Arleen Case number (if known)	
	■ No	,	ur wallet, in your home, in a	a safe deposit box, and on hand when you file your petition	
	institutions.	•		ertificates of deposit; shares in credit unions, brokerage houses, a the same institution, list each.	nd other similar
	□ No ■ Yes			Institution name:	
		17.1.	Checking Account	First Bank of Dalton	\$200.00
		17.2.	Checking Account	First Bank of Dalton	\$10.00
		17.3.	Checking Account	Bank of the Ozarks	\$47.00
		17.4.	Checking Account	Bank of the Ozarks	\$28.00
19.	 Yes Non-publicly traded stojoint venture No Yes. Give specific info 	ormation	·	and unincorporated businesses, including an interest in an % of ownership:	LLC, partnership, and
20.	Negotiable instruments	include p ents are t	ersonal checks, cashiers' o hose you cannot transfer to	and non-negotiable instruments checks, promissory notes, and money orders. It is someone by signing or delivering them.	
	□ No	RA, ERIS	SA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing plans	
	Yes. List each account	Туре	ely. of account: k) or Similar Plan	Institution name: Principal	\$15,000.00
		deposits	s you have made so that you	u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or other institution name or individual:	hers
	Annuities (A contract fo	r a period	lic payment of money to you	u, either for life or for a number of years)	
	■ No □ Yes Is	suer nam	ne and description.		
24.	Interests in an education 26 U.S.C. §§ 530(b)(1), 5			d ABLE program, or under a qualified state tuition program.	

■ No

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Page 12 of 61 Document Debtor 1 Wells, Kenneth Robert & Wells, Veronica Arleen Case number (if known) Debtor 2 Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No
□ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 13 of 61

	Document	Page 13 of t	OT	
Debto Debto	Malla Kannath Dahart 9 Malla Varaniaa Arlaan		Case number (if known)	
	Add the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$15,285.00
Part 5	Describe Any Business-Related Property You Own or Have an Interes	est In. List any real esta	te in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-related	d property?		
I	o. Go to Part 6.			
	es. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	it In.	
	you own or have any legal or equitable interest in any farm- o	r commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
50 D				
	you have other property of any kind you did not already list? xamples: Season tickets, country club membership			
	, , ,			
	Yes. Give specific information			
_	one specific members and the second s			
54.	Add the dollar value of all of your entries from Part 7. Write that	number here		\$0.00
	·		L	·
Part 8	List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			\$55,824.00
56. I	Part 2: Total vehicles, line 5	\$82,200.00		
57. I	Part 3: Total personal and household items, line 15	\$3,000.00		
58. I	Part 4: Total financial assets, line 36	\$15,285.00		
59. I	Part 5: Total business-related property, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	otal personal property. Add lines 56 through 61	\$100,485.00	Copy personal property total	\$100,485.00

Official Form 106A/B Schedule A/B: Property page 6

\$156,309.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

nation to identify your	case:		
Kenneth Robert	Wells		
First Name	Middle Name	Last Name]
First Name	Middle Name	Last Name	
nkruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA, ROME DIVISION	
			☐ Check if this is an amended filing
	Kenneth Robert First Name	First Name Middle Name	Kenneth Robert Wells First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	/ the Pro	perty Yo	ou Claim	as Exempt
---------	----------	-----------	----------	----------	-----------

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.					
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.					
	Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption					

Schedule A/B that lists this property	portion you own		opeomo laws triat anow exemption	
	Copy the value from Schedule A/B	Chec	k only one box for each exemption.	
ebtor 1 Exemptions 603 Frazier Dr Dalton GA, 30721-3835 County: Whitfield Line from Schedule A/B. 1.1	\$55,824.00		\$43,000.00 100% of fair market value, up to any applicable statutory limit	O.C.G.A. § 44-13-100(a)(1)
1993 Mazda Protege Line from Schedule A/B 3.2	\$200.00	•	\$200.00	O.C.G.A. § 44-13-100(a)(3)
			100% of fair market value, up to any applicable statutory limit	
1993 Ford Z71 Line from Schedule A/B: 3.3	\$3,000.00	•	\$3,000.00	O.C.G.A. § 44-13-100(a)(3)
			100% of fair market value, up to any applicable statutory limit	
Household Goods Line from Schedule A/B 6.1	\$2,000.00	•	\$2,000.00	O.C.G.A. § 44-13-100(a)(4)
			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B 11.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(4)
Ello Holli Golloddio FVD. 1111			100% of fair market value, up to any applicable statutory limit	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 15 of 61

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Jewe	elry rom Schedule A/B 12.1	\$500.00		\$500.00	O.C.G.A. § 44-13-100(a)(5)
Line	ioni scriedale A.D. 12.1			100% of fair market value, up to any applicable statutory limit	
	Bank of Dalton	\$200.00		\$200.00	O.C.G.A. § 44-13-100(a)(6)
Lille I	Ioni Scriedule A.B. 11.1			100% of fair market value, up to any applicable statutory limit	
	Bank of Dalton	\$10.00		\$10.00	O.C.G.A. § 44-13-100(a)(6)
Lille I	Ioni Scriedule A.B. 11.2			100% of fair market value, up to any applicable statutory limit	
	c of the Ozarks	\$47.00		\$47.00	O.C.G.A. § 44-13-100(a)(6)
Lille i	IOIII Scriedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
	c of the Ozarks	\$28.00		\$28.00	O.C.G.A. § 44-13-100(a)(6)
Line i	IOIII SCHEdule A/B. 17.4			100% of fair market value, up to any applicable statutory limit	
Princ	cipal rom Schedule A/B 21.1	\$15,000.00		\$15,000.00	O.C.G.A. § 44-13-100(a)(2)(F)
Lille I	IOIII Scriedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
(Subje	ou claiming a homestead exemption ect to adjustment on 4/01/19 and every 3			on or after the date of adjustment.)	
`	Yes. Did you acquire the property covere	d by the exemption within	n 1,21	5 days before you filed this case?	
	□ No				
ı	☐ Yes				

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 16 of 61

Fill	l in this inf	ormation to identify your	case:		
De	btor 1]
		First Name	Middle Name	Last Name	}
	btor 2	Veronica Arleen First Name		Loot Nome	
(Spo	ouse if, filing)	First Name	Middle Name	Last Name]
Un	ited States	Bankruptcy Court for the:	NORTHERN DISTRICT OF	GEORGIA, ROME DIVISION	
Ca	se number				1
	nown)				☐ Check if this is an
					amended filing
∩f	fficial F	Form 106C			
					
50	chedi	lie C: The Pro	operty You Cla	im as Exempt	4/16
propout a	perty you lis	ited on Schedule A/B: Prope	rty (Official Form 106A/B) as yo	ogether, both are equally responsible for sup our source, list the property that you claim a ecessary. On the top of any additional pages	s exempt. If more space is needed, fill
to a app Pa	particular	dollar amount and the valutory amount. entify the Property You Cla	ue of the property is determi	exemption of 100% of fair market value ned to exceed that amount, your exemp	
1.	Which se	t of exemptions are you cl	aiming? Check one only, even	if your spouse is filing with you.	
	You are	e claiming state and federal r	onbankruptcy exemptions. 11	U.S.C. § 522(b)(3)	
	☐ You are	e claiming federal exemptions	s. 11 U.S.C. § 522(b)(2)		
2.	For any p	property you list on Sched	ule A/B that you claim as exe	mpt, fill in the information below.	
		ription of the property and lin A/B that lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
De		<u>cemptions</u>			
	Brief desc	ription: Schedule A/B:			
	Line nom	Goricadio A.B.		☐ 100% of fair market value, up to any applicable statutory limit	
3.			nption of more than \$160,375		
	(Subject to	adjustment on 4/01/19 and	every 3 years after that for case	es filed on or after the date of adjustment.)	
	_	Did	and the state of t	a 4 045 days before you filed this see 2	
	☐ Yes.	, , , , ,	covered by the exemption within	n 1,215 days before you filed this case?	
		No Yes			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 17 of 61

Fill in this i	nformation to identify you	r case:			
Debtor 1	Kenneth Robert			\neg	
Debtor 2	First Name	Middle Name Last Name			
(Spouse if, filing	Veronica Arleer First Name	Middle Name Last Name			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF GEORGIA, RO	ME DIVISION		
Case number	er				
(if known)					if this is an
				amend	led filing
Official F	Form 106D				
Schedu	ule D: Creditors	Who Have Claims Secure	d by Property	У	12/15
		f two married people are filing together, both are ed, number the entries, and attach it to this form. On			
1. Do any cred	ditors have claims secured by	your property?			
□ No. 0	Check this box and submit th	is form to the court with your other schedules. You	u have nothing else to rep	port on this form.	
Yes.	Fill in all of the information be	elow.			
Part 1: L	ist All Secured Claims				
		nore than one secured claim, list the creditor separately		Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	· ·	value of collateral.	claim	If any
2.1 Ally F	Financial 's Name	Describe the property that secures the claim:	\$63,445.00	\$60,000.00	\$3,445.00
		2015 Dodge Ram			
РО В	ox 380901	As of the date was file the plain in Olympia.			
Minn	eapolis, MN	As of the date you file, the claim is: Check all that apply.			
55438	8-0901	Contingent			
Number	, Street, City, State & Zip Code	Unliquidated			
Who owes t	:he debt? Check one.	Disputed			
_		Nature of lien. Check all that apply. An agreement you made (such as mortgage or see	ocured		
Debtor 1 o	•	car loan)	cuieu		
Debtor 2 o	only and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	ne of the debtors and another	☐ Judgment lien from a lawsuit			
_	this claim relates to a	Other (including a right to offset)			
Date debt wa	-	Last 4 digits of account number			
2.2 Natio	onstar Mortgage,	Describe the property that secures the claim:	\$8,686.00	\$55,824.00	\$0.00
Creditor'	's Name	603 Frazier Dr, Dalton, GA 30721-3835			
		As of the date you file, the claim is: Check all that			
_	ox 650783	apply.			
	s, TX 75265-0783	Contingent			
Number	, Street, City, State & Zip Code	Unliquidated			
Who owes t	he debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 o		☐ An agreement you made (such as mortgage or se	ocured		
Debtor 2 o	•	car loan)	Jourou		
_	and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	ne of the debtors and another	☐ Judgment lien from a lawsuit			
	this claim relates to a	Other (including a right to offset)			
commun	nity debt				
Date debt wa	as incurred	Last 4 digits of account number			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 18 of 61

Debt	or 1	Kenneth Robert W	/ells		C	ase number (f know)		
		First Name	Middle Name	Last Name				
Debt	or 2	Veronica Arleen V	Vells					
		First Name	Middle Name	Last Name				
2.3	We	lls Fargo Dealer						
2.3		vices	Descri	be the property that secures	s the claim:	\$19,130.00	\$19,000.00	\$130.00
	Credi	itor's Name	2015	Nissa Rogue				
			As of t	the date you file, the claim is	Check all that			
		Box 19657	apply.	ino dato you mo, the claim it	. Oncok un triat			
	Irvi	ne, CA 92623-9657	🗆 Co	ntingent				
	Numl	ber, Street, City, State & Zip Co	ode 🔲 Un	iquidated				
			☐ Dis	puted				
Who	owe	s the debt? Check one.	Natur	e of lien. Check all that apply.	-			
■ D	ebtor	1 only	☐ An	agreement you made (such a	s mortgage or secure	ed		
□ De	ebtor	2 only	ca	r Ioan)				
_		1 and Debtor 2 only	☐ Sta	tutory lien (such as tax lien, m	echanic's lien)			
_		t one of the debtors and an		Igment lien from a lawsuit	,			
_		if this claim relates to a		ner (including a right to offset)				
		unity debt		ior (including a right to oncot)				
Date	debt	was incurred		Last 4 digits of account nur	mber			
				Laot 4 digito of account has				
Add 1	the de	ollar value of your entries	s in Column A c	on this page. Write that numl	ber here:	\$91,261.00	7	
				value totals from all pages.			7	
		number here:				\$91,261.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 19 of 61

		Document Page 19 of 61	
Fill in this infor	mation to identify your case:		
Debtor 1	Kenneth Robert Wells		
200101		Aiddle Name Last Name	
Debtor 2	Veronica Arleen Wells		
(Spouse if, filing)	First Name N	fliddle Name Last Name	
United States B	ankruptcy Court for the: NORT	THERN DISTRICT OF GEORGIA, ROME DIVISION	
Case number			
(if known)			Check if this is an
			amended filing
Official For	m 106F/F		
		ave Unsecured Claims	12/15
		for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY	
Schedule G: Exec D: Creditors Who	utory Contracts and Unexpired Leas Have Claims Secured by Property. It Page to this page. If you have no info	ld result in a claim. Also list executory contracts on Schedule A/B: Property (O ses (Official Form 106G). Do not include any creditors with partially secured cla f more space is needed, copy the Part you need, fill it out, number the entries ir ormation to report in a Part, do not file that Part. On the top of any additional pa	ims that are listed in Schedule the boxes on the left. Attach
Part 1: List	All of Your PRIORITY Unsecured	I Claims	
	tors have priority unsecured claims	against you?	
■ No. Go to	Part 2.		
Yes.			
Part 2: List /	All of Your NONPRIORITY Unsec	cured Claims	
3. Do any credi	tors have nonpriority unsecured cla	ims against you?	
☐ No. You h	ave nothing to report in this part. Subm	nit this form to the court with your other schedules.	
Yes.			
unsecured cla	aim, list the creditor separately for each	the alphabetical order of the creditor who holds each claim. If a creditor has more claim. For each claim listed, identify what type of claim it is. Do not list claims alread the creditors in Part 3.If you have more than three nonpriority unsecured claims fill out	y included in Part 1. If more
			Total claim
4.1 Ameri	can Honda Finance	Last 4 digits of account number	\$0.00
Nonprior	ity Creditor's Name		
PO Ro	x 1027	When was the debt incurred?	
	retta, GA 30009-1027		
	Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.		
■ Debte	or 1 only	☐ Contingent	
☐ Debte	or 2 only	☐ Unliquidated	
☐ Debto	or 1 and Debtor 2 only	☐ Disputed	
☐ At lea	ast one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	k if this claim is for a community	☐ Student loans	
debt	aim subject to offset?	Obligations arising out of a separation agreement or divorce that you did	not
	ann subject to onset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
■ No			
☐ Yes		Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 20 of 61

Debto	Wells, Kenneth Robert & Wells, V	'eronica Arleen Case number (# know)	
4.2	Bank of America	Last 4 digits of account number	\$2,158.00
	Nonpriority Creditor's Name	When was the debt incurred?	. ,
	PO Box 982235	When was the dept incurred:	
	El Paso, TX 79998-2235	_	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. ☐ Debtor 1 only	_	
		Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Canital One Bank	Last 4 digits of account number	\$0.00
4.3	Capital One Bank Nonpriority Creditor's Name	\$0.00	
		When was the debt incurred?	
	PO Box 30281		
	Salt Lake City, UT 84130-0281 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Chase Bank USA, NA	Last 4 digits of account number	\$2,499.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 15298	Wileli was the dept incurred:	
	Wilmington, DE 19850-5298		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		<u> </u>	
	Yes	Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 21 of 61

Chase Bank USA, NA	Last 4 digits of account number	\$5,524.0
Nonpriority Creditor's Name		ψ0,024.0
PO Box 15298	When was the debt incurred?	
Wilmington, DE 19850-5298		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Citicards/CBNA	Last 4 digits of account number	\$5,735.0
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 6241		
Sioux Falls, SD 57117-6241	-	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify	
Columbus Bank & Trust	Last 4 digits of account number	\$7,876.0
Nonpriority Creditor's Name		Ψ1,010.
1148 Broadway	When was the debt incurred?	
Columbus, GA 31901-2429 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the daminis. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 22 of 61

Comenity Capital/HSN	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name		\$0.0C
	When was the debt incurred?	
PO Box 182120		
Columbus, OH 43218-2120 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Discover Bank	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 15316	when was the debt incurred?	
Wilmington, DE 19850-5316		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Discover Personal Loans	Last 4 digits of account number	\$17,109.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 30954 Salt Lake City, UT 84130-0954	When was the dest incurred:	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 23 of 61

Debto Debto		Case number (f know)	
4.11	First National Bank of Omaha Nonpriority Creditor's Name	Last 4 digits of account number	\$6,497.00
	Nonphonty Creditors Name	When was the debt incurred?	
	1620 Dodge St		
	Omaha, NE 68102-1593	- Acceptable for a Charles Market Object Halles	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	П	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
4.12	GMAC Mortgage	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name		•
	2454 Hammand Ava	When was the debt incurred?	
	3451 Hammond Ave Waterloo, IA 50702-5345		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.13	Ocwen Loan Servicing, LLC	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	1661 Worthington Rd Ste 100 West Palm Beach, FL 33409-6493		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 24 of 61

447	Office Bases (OD) 4	Last A divites of assessment and Last	** *=		
4.14	Office Depot/CBNA Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00		
	Nonphony Ground o Namo	When was the debt incurred?			
	PO Box 6283				
	Sioux Falls, SD 57117-6283 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	no or the date year me, the stall her encountry			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.15	RMB	Last 4 digits of account number	\$1,276.77		
	Nonpriority Creditor's Name				
	409 Bearden Park Cir	When was the debt incurred?			
	Knoxville, TN 37919-7448				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	\square Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify			
4.16	Sears/CBNA	Last 4 digits of account number	\$1,948.00		
	Nonpriority Creditor's Name	When was the debt incurred?			
	PO Box 6283				
	Sioux Falls, SD 57117-6283				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not			
	_	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts			
	■ No	_			
	Yes	Other. Specify			

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 25 of 61

SunTrust Bank	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name	<u> </u>	ψ0.0
DO Dov 05004	When was the debt incurred?	
PO Box 85024 Richmond, VA 23285-5024		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Syncb/Brandsmart	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name		
DO D 005000	When was the debt incurred?	
PO Box 965036 Orlando, FL 32896-5036		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Syncb/Evine	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 965007		
Orlando, FL 32896-5007	<u></u>	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
☐ Yes	Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 26 of 61

Debto Debto		Veronica Arleen Case number (f know)	
4.20	Syncb/Lowes Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 965028		
	Orlando, FL 32896-5028 Number Street City State Zlp Code	As of the date you file the plains in Charle all that contr	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.21	Syncb/Rooms To Go	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 965028	when was the debt incurred?	
	Orlando, FL 32896-5028		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.22	The Home Depot/CBNA	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6282		
	Sioux Falls, SD 57117-6282 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oncot all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 27 of 61

Fractor Supply/CBNA	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 6283	When was the dest incurred:	
Sioux Falls, SD 57117-6283		
lumber Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	φ	
	ou.	Other. Add all other priority dissecured dailins. Write that amount here.	ou.	Ф	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims	0	Obligations spiritus and of a second in a second and discuss that			
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	50,622.77
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	50,622.77

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 28 of 61

Fill in this infor	mation to identify your	case:			
Debtor 1	Kenneth Robert	Wells			
	First Name	Middle Name	Last Name)	
Debtor 2	Veronica Arleen	Wells			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA, ROME DIVISION		
Case number					
(if known)					Check if this is
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1			, , - · , , - · · · · ·		
	Name				
	Number	Street			_
_	City		State	ZIP Code	
.2	Name				_
	Number	Street			_
	City		State	ZIP Code	
3	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
4	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
5	Name				
	Number	Street			
	City		State	ZIP Code	_

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 29 of 61

		Docume	ent Page 29 or	01	
Fill in this i	information to identify your	case:			
Dobtor 1	Kannath Dahart	Nelle			
Debtor 1	Kenneth Robert V	Middle Name	Last Name		
Debtor 2	Veronica Arleen	Wells			
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	Γ OF GEORGIA, ROME Γ	IVISION	
Case numb (if known)	er				k if this is an
Sched	gether, both are equally resp	e also liable for any debt	orrect information. If mo	complete and accurate as possible. If t re space is needed, copy the Additions On the top of any Additional Pages, w	al Page, fill it out,
case numbe	er (if known). Answer every of ou have any codebtors? (if)	question.	0 . 0	. ,	
1. Бо у	ou have any codebiors: (ii)	ou are ming a joint case, a	o not list citrici spouse as	a codesion.	
■ No □ Yes					
Californ	in the last 8 years, have you nia, Idaho, Louisiana, Nevada, Go to line 3. Did your spouse, former spou	New Mexico, Puerto Rico	o, Texas, Washington, and	(Community property states and territor Wisconsin.)	ies include Arizona,
line 2 a	igain as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	your spouse is filing with you. List the you have listed the creditor on Sched Schedule D, Schedule E/F, or Schedu	ule D (Official Form
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you Check all schedules that apply:	ou owe the debt
3.1				☐ Schedule D. line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	-
	Number Street Dity	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line ☐ Schedule G, line	-
<u> </u>	Number Street			-	
	City	State	ZIP Code		

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E-11									
	in this information to identify you	n Robert Wells							
Dei	Kenneth	1 Robert Wells			-				
1	btor 2 Veronica buse, if filing)	a Arleen Wells			-				
Uni	ited States Bankruptcy Court fo	r the: NORTHERN DISTRIC	CT OF GEORGIA, R	OME	_				
1	se number nown)		-			Check if this is	ed filing		.h 1 10
						A supplem income as	ent snowing of the followi		chapter 13
0	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your II	ncome							12/15
spo atta	plying correct information. If use. If you are separated and ch a separate sheet to this for Describe Employm	your spouse is not filing wit rm. On the top of any additio	h you, do not inclu	de informa	tion a	bout your spou	ise. If more	space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fili	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Emp	oyed		
		Employment status	☐ Not employed			■ Not e	■ Not employed		
	employers.	Occupation	Driver						
	Include part-time, seasonal, c self-employed work.	Employer's name	Atlantic Packa	ging					
	Occupation may include studhomemaker, if it applies.	ent or Employer's address	806 N 23rd St Wilmington, N	C 28405-	1802				
		How long employed the	here? 12 yea	ars					
Pai	rt 2: Give Details About	Monthly Income							
	mate monthly income as of thess you are separated.	ne date you file this form. If y	ou have nothing to re	port for any	line,	write \$0 in the sp	ace. Include	your non-filir	ng spouse
	ou or your non-filing spouse have ce, attach a separate sheet to thi		bine the information f	or all emplo	yers f	or that person on	the lines bel	low. If you ne	ed more
					F	For Debtor 1	For Debt	tor 2 or g spouse	
2.		salary, and commissions (be nly, calculate what the monthly		2.	\$_	3,603.24	\$	0.00	
3.	Estimate and list monthly o	vertime pay.		3.	+\$_	0.00	+\$	0.00	
4.	Calculate gross Income. Ad	dd line 2 + line 3.		4.	\$_	3,603.24	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. 215.72 \$ 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 5e. Insurance 5e. \$ 80.35 \$ 5f. Domestic support obligations 5f. Domestic support obligations 5g. Union dues 5h. Other deductions. Specify 5h. \$ 0.00 \$ 5h. Other deductions. Specify 5h. \$ 0.00 \$ 5h. Other deductions. Specify 5h. \$ 0.00 \$ 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,606.06 \$ 6. \$ 997.18 \$ 6. \$ 997.18 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,606.06 \$ 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and trom operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$ 9. \$ 0.00 \$	
Copy line 4 here 4. \$ 3,603.24 \$ 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 5c. Voluntary contributions for retirement plans 5c. \$ 215.72 \$ 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ 5e. Issurance 5e. \$ 80.35 \$ 5f. Domestic support obligations 5f. Domestic support obligations 5f. Domestic support obligations 5f. Union dues 5f. Other deductions. Specify: 5h. +\$ 0.00 \$ 5h. +\$ 0.	
5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. Q. 0.00 \$ 5e. Insurance 5f. Domestic support obligations 5f. Q. 0.00 \$ 5g. \$0.00 \$ 5g. \$0.	0.00
5a. Tax Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. \$1215.72\$\$ 5d. Required repayments of retirement fund loans 5d. \$0.00\$\$ 5e. Insurance 5e. Sa0.35\$\$ 5f. \$0.000\$\$ 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. \$997.18\$\$ 5h. Other deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. \$997.18\$\$ 5h. Other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you represent that you regularly receive Include cash assistance Program) to housing subsidies. Specify. 9g. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$0.00\$\$ \$89. \$0.0	
5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions 5	0.00
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56. Required repayments of retirement fund loans 5e. Insurance 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ 5g. Union dues 5h. Other deductions. Specify: 5h. H\$ 0.00 \$ 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 997.18 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2,606.06 \$ 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 89 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 89 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 89 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.	0.00
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8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$ 8e. Social Security 8e. \$0.00 \$ 89 60. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8d. \$0.00 \$ 8d. \$0.	0.00
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8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ 89. Add all other income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +3 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.	0.00 0.00
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Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +S 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.	96.00
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +3 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.	\$ 3,502.06
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.	0.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12.	3,502.06 mbined
	onthly income

Official Form 106I Schedule I: Your Income page 2

	in this informa	ation to identify yo	ur case:			I		
	otor 1			1		Choo	k if this is:	
Dep	ntor r	Kenneth Rob	pert wei	IS			An amended filing	
	otor 2	Veronica Arl	een Wel	ls			A supplement show expenses as of the	ring postpetition chapter 13
(Spo	ouse, if filing)						expenses as or the	following date:
Unit	ted States Bank	ruptcy Court for the:	NORTH	HERN DISTRICT OF GEOF DN	RGIA, ROME	_	MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your E						12/1
info	ormation. If m		eded, attao n.	If two married people are ch another sheet to this fo				
1.	Is this a joi		ioiu					
	☐ No. Go t	o line 2.						
	Yes. Doe	es Debtor 2 live in	n a separa	ate household?				
	□ /		t file Offic	al Form 106J-2, <i>Expenses t</i>	or Separate Housel	noldof Debtor	2.	
2.	Do you hay	re dependents?	■ No					
۷.	•	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents							☐ Yes
								□ No
							- ·	Yes
								□ No □ Yes
							· ——	⊔ Yes □ No
								☐ Yes
3.	•	penses include		No				
		of people other th ad your depender	an _	Yes				
exp app	imate your e penses as of a plicable date.	a date after the b	ur bankru ankruptcy	ptcy filing date unless yo r is filed. If this is a supple	emental Schedule J			
valu		ssistance and hav		government assistance if yed it on Schedule I: Your I			Your exp	enses
4.		or home ownersh nd any rent for the		ses for your residence. Inclot.	clude first mortgage	4. \$		794.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner's,	or renter's	s insurance		4b. \$		0.00
	•	e maintenance, re				4c. \$		50.00
		eowner's association				4d. \$		0.00
5.	Additional	mortgage payme	nts for yo	our residence, such as hom	ne equity loans	5. \$		0.00

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 33 of 61

ebtor 1 ebtor 2	Wells, Kenneth Robert & Wells, Veronica Arleen	Case num	ber (if known)	
. Utilit	ies:			
6a.	Electricity, heat, natural gas	6a.	\$	335.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
6d.	Other. Specify:	6d.	\$	0.00
Food	d and housekeeping supplies	7.	\$	958.06
Child	dcare and children's education costs	8.	\$	0.00
Cloth	hing, laundry, and dry cleaning	9.	\$	50.00
. Pers	onal care products and services	10.	\$	50.00
. Medi	ical and dental expenses	11.	\$	50.00
. Tran	sportation. Include gas, maintenance, bus or train fare.			050.00
	ot include car payments.	12.	·	250.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.		0.00
. Char	ritable contributions and religious donations	14.	\$	0.00
. Insu				
	ot include insurance deducted from your pay or included in lines 4 or 20.	45-	¢	0.00
	Life insurance	15a.	·	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	150.00
	Other insurance. Specify:	15d.	\$	0.00
. raxe Spec	es. Do not include taxes deducted from your pay or included in lines 4 or 20. cify:	16.	\$	0.00
	allment or lease payments:	47-	•	
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not repo		\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 1) or payments you make to support others who do not live with you.	UGI).	\$	0.00
Spec		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on		ır Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	·	0.00
	er: Specify:		+\$	0.00
	ulate your monthly expenses			0.00
	Add lines 4 through 21.		\$	2.027.06
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	612	\$	2,937.06
		0J-2	φ	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,937.06
	ulate your monthly net income.	00-	•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		3,502.06
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,937.06
23c.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	565.00
For ex	ou expect an increase or decrease in your expenses within the year aff xample, do you expect to finish paying for your car loan within the year or do you experication to the terms of your mortgage?			or decrease because of a
	·			
☐ Ye	es. Explain here:			

				_
Fill in this	information to identify your	case:		
Debtor 1	Kenneth Robert	Wells		
	First Name	Middle Name	Last Name)
Debtor 2	Veronica Arleen			
(Spouse if, filing	g) First Name	Middle Name	Last Name	
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT OF	GEORGIA, ROME DIVISION	
Case numb	per			
(if known)				☐ Check if this is an amended filing
Official I	Form 106Dec			
Decla	ration About a	an Individual D	Debtor's Schedules	12/15
f two marri	ed people are filing together	, both are equally responsibl	le for supplying correct information.	
			amended schedules. Making a false state	
	noney or property by fraud in oth. 18 U.S.C. §§ 152, 1341, 1		tcy case can result in fines up to \$250,00	00, or imprisonment for up to 20
years, or be	7tii. 10 0.3.C. 33 132, 1341, 1	515, and 5571.		
	•			
	Sign Below			
Did ve	ou nay or agree to nay some	one who is NOT an attorney	to help you fill out bankruptcy forms?	
Did ye	ou pay or agree to pay some	one who is NOT an attorney	to help you fill out bankruptcy forms:	
■ N	10			
□ Y	es. Name of person		Attach Ba	ankruptcy Petition Preparer's Notice,
			Declaration	on, and Signature (Official Form 119)
	penalty of perjury, I declare ey are true and correct.	that I have read the summary	y and schedules filed with this declaration	on and
tildt til	oy are true and correct			
	/ Wells, Kenneth Robert		X /s/ Wells, Veronica Arleen	
	enneth Robert Wells		Veronica Arleen Wells	
SI	gnature of Debtor 1		Signature of Debtor 2	
Da	November 4, 2016		Date November 4, 2016	
		·		

Cas	e 16-42676-pwb		led 11/04/16 cument Pa	Entered 11/04/1	16 15:29:54	Desc	: Main
Fill in this infor	rmation to identify your						
Debtor 1	Kenneth Robert						
	First Name	Middle Name	La	st Name	ł		
Debtor 2	Veronica Arleen						
(Spouse if, filing)	First Name	Middle Name	Las	st Name			
United States B	Sankruptcy Court for the:	NORTHERN DIS	STRICT OF GEOR	GIA, ROME DIVISION			
Case number							
(if known)					[☐ Check	if this is an
						amend	led filing
	orm 106Sum of Your Assets	and Liabiliti	es and Certa	ain Statistical Info	ormation	1	2/15
information. Fill		es first; then comp	olete the information	gether, both are equally roon on this form. If you are the top of this page.			
Part 1: Sum	marize Your Assets						
						Your as	
							what you own
	A/B: Property (Official Fo	,				•	EE 924 00
1a. Copy li	ine 55, Total real estate, f	rom Schedule A/B.				\$	55,824.00
1h Conv li	ine 62. Total personal pro	nerty from Schedu	ILE A/R			\$	100 485 00

	Ta. Copy line 55, Total real estate, Irom Schedule A/B	Ψ—	
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	100,485.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	156,309.00
Par	t 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	91,261.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e \$Gchedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	50,622.77
	Your total liabilities	\$	141,883.77
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$_	3,502.06
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,937.06

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 36 of 61

Debtor 1 Wells, Kenneth Robert & Wells, Veronica
Debtor 2 Arleen Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____3,740.21

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 37 of 61

	in this inform	ation to identify your	case:						
De	btor 1	Kenneth Robert							
DΔ	btor 2	First Name Veronica Arleen	Middle Name	Last Name					
	ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ited States Bar	kruptcy Court for the:	NORTHERN DISTRICT (OF GEORGIA, ROME DIVISI	ON				
	se number				I —	heck if this is an mended filing			
Sta	as complete ar	of Financial		e filing together, both are ed	ankruptcy qually responsible for supply additional pages, write your r				
•		er every question. etails About Your Ma	rital Status and Where You	Lived Refore					
1.		current marital statu		Livea Beloie					
	■ Married□ Not married	ried							
2.	During the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. List	all of the places you liv	red in the last 3 years. Do not i	nclude where you live now.					
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	ived Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. state				-	y property state or territory? o, Texas, Washington and Wis				
	■ No □ Yes. Mal	ke sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	cial Form 106H).					
Pai	rt 2 Explain	n the Sources of You	Income						
4.	Fill in the total	l amount of income you	nployment or from operating u received from all jobs and a ave income that you receive to	II businesses, including part-t		ar years?			
	□ No ■ Yes. Fill	in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
	•	of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$35,265.18	☐ Wages, commissions, bonuses, tips	\$0.00			
			Operating a business		☐ Operating a business				

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 38 of 61

Debtor 2 Wells	s, Kenneth Robert	se number(if known)			
		Dahter 4		Dobton 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar (January 1 to De	r year: cember 31, 2015)	■ Wages, commissions, bonuses, tips	\$15,802.00	☐ Wages, commission bonuses, tips	ns, \$0.00
		Operating a business		☐ Operating a busines	ss
	year before that: cember 31, 2014)	■ Wages, commissions, bonuses, tips	\$40,520.00	☐ Wages, commission bonuses, tips	ns, \$0.00
		Operating a business		☐ Operating a busines	ss
□ No	rce and the gross inco	me from each source separatel Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	Gross income
		Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
	of current year until d for bankruptcy:		\$0.00	SSI	\$9,016.20
For last calendar (January 1 to De	year: cember 31, 2015)		\$0.00	SSI	\$12,011.00
	year before that: cember 31, 2014)		\$0.00	SSI	\$11,819.00
Part 3: List Ce	ertain Payments You	Made Before You Filed for E	Bankruptcy		
□ No. N	either Debtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or household	mer debts. Consumer debts	are defined in 11 U.S.C.§	101(8) as "incurred by an
Ι	☐ No. Go to line	ore you filed for bankruptcy, did 7.	you pay any creditor a total of	\$6,425* or more?	
Į.	creditor. Do	each creditor to whom you paid o not include payments for dor o an attorney for this bankrupto	mestic support obligations, su		
_		t on 4/01/19 and every 3 years a		after the date of adjustmer	nt.
		re you filed for bankruptcy, did		\$600 or more?	
	No. Go to line	7.			
Į.		each creditor to whom you paid or domestic support obligations ptcy case.			
Creditor's N	lame and Address	Dates of payme	ent Total amount	Amount you Was still owe	this payment for

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 39 of 61

	btor 1 Wells, Kenneth Robert & Wells,	Veronica Arleen	Cas	e number (if known)						
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general partr which you are an officer, director, person in combusiness you operate as a sole proprietor. 11 U.	ners; relatives of any generator, or owner of 20% or mo	al partners; partnershi re of their voting secu	ps of which you are rities; and any mana	a general partr aging agent, inc	ner; corporations of cluding one for a				
	■ No □ Yes. List all payments to an insider.									
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment				
8.	Within 1 year before you filed for bankrupto	y, did you make any pay	paid ments or transfer an	still owe	ount of a deb	t that benefited an				
	insider? Include payments on debts guaranteed or cosig	ned by an insider.								
	■ No □ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name				
Pai	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures								
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury c and contract disputes.									
	■ No □ Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of the	e case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.									
	No. Go to line 11.☐ Yes. Fill in the information below.									
	Creditor Name and Address	Describe the Property		Date		Value of the property				
11	Within 90 days before you filed for hankrun	Explain what happened		uncial institution s	ot off any am	ounts from your				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No									
	Yes. Fill in the details.	Baradha da andan da	P4 4 I	Dete						
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	iction was	Amount				
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		erty in the possessio	n of an assignee f	or the benefit	of creditors, a				
	■ No □ Yes									
Pai	tt 5: List Certain Gifts and Contributions									
13.	■ No	cy, did you give any gift	s with a total value o	of more than \$600	per person?					
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 p	er Describe the gifts			you gave	Value				
	Person to Whom You Gave the Gift and Address:			the gi	13					

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 40 of 61

	wells, Kenneth Robert & Wells	, Vero	nica Arleen Ca	ase number(i	f known)				
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con-	-		with a total v	value of more than \$	600 to any charity?			
	Gifts or contributions to charities that too more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed		Dates you contributed	Value			
Par	t 6: List Certain Losses								
15.	Within 1 year before you filed for bankrupt or gambling?	tcy or s	ince you filed for bankruptcy, did you	ı lose anythi	ng because of theft,	fire, other disaster,			
	■ No □ Yes. Fill in the details.								
	how the loss occurred	Include	the amount that insurance has paid. Lis ce claims on line 33 of Schedule A/B: Pro	t pending	Date of your loss	Value of property lost			
Par	t 7: List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or production prepared include any attorneys, bankruptcy petition prepared in No Yes. Fill in the details. Person Who Was Paid Address	eparing	a bankruptcy petition?	required in y	Date payment or transfer was	y to anyone you Amount of payment			
	Email or website address Person Who Made the Payment, if Not Yo	u			made				
	Rob Rickman 1755 North Brown Rd Suite 200 Lawrenceville, GA 30043		\$335 - Filing Fee		10/2016	\$335.00			
	001 Debtorcc, Inc. 378 Summit Ave Jersey City, NJ 07306-3110		\$14.95 Credit Counseling		10/2016	\$14.95			
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that yo	ors or	to make payments to your creditors?		transfer any propert	y to anyone who			
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address		Description and value of property transferred		ny property or received or debts change	Date transfer was made			
	Person's relationship to you			, oxe					

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 41 of 61

	otor 1 otor 2 Wells, Kenneth Robert & Wells	, Veronica Arleen		Case nur	mber (if known)	
	beneficiary? (These are often called asset-pro No Yes. Fill in the details.	otection devices.)				
	Name of trust	Description and	d value of the pr	operty trans	sferred	Date Transfer was made
Pa	t 8: List of Certain Financial Accounts, In	nstruments, Safe Depos	sit Boxes, and S	torage Units	3	
20.	Within 1 year before you filed for bankrupte sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso No Yes. Fill in the details.	or other financial acco	unts; certificate:	s of deposit		,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accinstrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables? No	year before you filed f	or bankruptcy, a	any safe dep	osit box or other deposi	tory for securities,
	☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe and ZIP Code)	access to it? rr, Street, City, State	Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit ■ No □ Yes. Fill in the details.	or place other than yo	ur home within '	1 year befor	e you filed for bankruptc	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City, State		the contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Contro	ol for Someone Else				
23.	Do you hold or control any property that so someone. No Yes. Fill in the details.	omeone else owns? Ind	clude any prope	rty you borr	owed from, are storing fo	or, or hold in trust for
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pr (Number, Street, Circode)		Describe	the property	Value
Pai	t 10: Give Details About Environmental Int	formation				

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 42 of 61

No Ves. Fill in the details. Case Title Case Number Court or agency Name Address (Number, Street, City, State and ZIP Code)		wells, Kenneth Robert & Wells,	Veronica Arleen	Case number (if known)	
Yes, Fill in the details. Name of site	24.	_	you may be liable or potentially liable ι	ınder or in violation of an environmer	ntal law?
Address (Number, Street, City, State and ZP Code) Addres		_			
No			Address (Number, Street, City, State and		Date of notice
Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Nam	25.	Have you notified any governmental unit of	any release of hazardous material?		
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes, Fill in the details. Casa Title Gase Number Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business Chair Title A partner in a partnership A partner in a partnership An owner of at least 5% of the voting or equity securities of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other partless. Employer Identification number Do not include Social Security number or ITIN. Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Address Address Stign Below It have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy, Sea, 1541, 1519, and 3571. Is/ Wells, Kenneth Robert Wells Signature of Debtor 1		_ ```			
Yes. Fill in the details. Case Title			Address (Number, Street, City, State and		Date of notice
Yes. Fill in the details. Case Title	26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	onmental law? Include settlements an	nd orders.
Case Title Case Number Name Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed No		_ ```			
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) Describe the nature of the business Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed		Case Title	Name Address (Number, Street, City, State	Nature of the case	
A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address Describe the nature of the business Name of accountant or bookkeeper Name of accountant or bookkeeper Do not include Social Security number or ITIN. Dates business existed	Par	t 11: Give Details About Your Business or 0	Connections to Any Business		
No ☐ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Is/ Wells, Kenneth Robert Kenneth Robert Wells Signature of Debtor 1 Signature of Debtor 2	28.	☐ A member of a limited liability compa ☐ A partner in a partnership ☐ An officer, director, or managing exe ☐ An owner of at least 5% of the voting ■ No. None of the above applies. Go to P ☐ Yes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code)	ecutive of a corporation or equity securities of a corporation art 12. in the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security	number or ITIN.
Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. Is U.S.C. §§ 152, 1341, 1519, and 3571. Is/ Wells, Kenneth Robert Kenneth Robert Wells Signature of Debtor 1 Veronica Arleen Veronica Arleen Veronica Arleen Wells Signature of Debtor 2	_0.	institutions, creditors, or other parties.	y, ala you givo a illianola olacollon c	anyono assanyoan saomooon molac	io an illianola
Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 18 Wells, Kenneth Robert Kenneth Robert Wells Signature of Debtor 1 18 Wells, Veronica Arleen Veronica Arleen Wells Signature of Debtor 2		_ '''			
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 18 Wells, Kenneth Robert Kenneth Robert Wells Signature of Debtor 1 Signature of Debtor 2		Address	Date Issued		
true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. 18 Wells, Kenneth Robert Kenneth Robert Wells Signature of Debtor 1 18 Wells, Veronica Arleen Veronica Arleen Wells Signature of Debtor 2	Par	t 12: Sign Below			
Kenneth Robert Wells Signature of Debtor 1 Veronica Arleen Wells Signature of Debtor 2	l hav true bank	ve read the answers on this Statement of Fina and correct. I understand that making a false kruptcy case can result in fines up to \$250,00	statement, concealing property, or ob	aining money or property by fraud in	
Signature of Debtor 1 Signature of Debtor 2				1	
Date November 4, 2016 Date November 4, 2016					
	Dat	November 4, 2016	Date November 4, 2010	<u> </u>	

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 43 of 61

Debtor 1 Debtor 2	Wells, Kenneth Robert & Wells, Veronica Arleen	Case number (if known)
■ No	tach additional pages to Your Statement of Financial Affairs for Individ	uals Filing for Bankruptcy (Official Form 107)?
☐ Yes		
, ,	ly or agree to pay someone who is not an attorney to help you fill out b	ankruptcy forms?
No		
☐ Yes. Na	me of Person . Attach the Bankruptcy Petition Preparer's Notice. Dec	laration, and Signature (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Kenneth Robert Wells				
Debtor 2 (Spouse, if filing)	Veronica Arleen Wells				
United States B	ankruptcy Court for the:	Northern District of Georgia, Rome Division			
Case number (if known)					

Check	Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:							
-	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: **Calculate Your Average Monthly Income**

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the

					umn A tor 1	Columi Debtor non-fil	
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	mmissio	ns (before all	\$	3,740.21	\$	0.00
Alimony and maintenance payments. Do not include Column B is filled in.	e payme	nts from a	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly p of you or your dependents, including child suppor rom an unmarried partner, members of your household commates. Include regular contributions from a spou- to not include payments you listed on line 3	t. Include I, your de	e regular ependents	contributions , parents, and		0.00	\$	0.00
et income from operating a business, rofession, or farm	Debtoi	r 1					
ross receipts (before all deductions)	\$_	0.00					
rdinary and necessary operating expenses	-\$	0.00					
et monthly income from a business, profession, or fa	ırm \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
et income from rental and other real property	Debtoi						
ross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	-\$_	0.00					
Net monthly income from rental or other real property	Φ.	0.00	Copy here -> :	Φ.	0.00	Q	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 45 of 61

Case number (if known)

Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 3,740.21 3,740.21 + \$ 0.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 3,740.21 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Total Copy here=> 3,740.21 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 3,740.21 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). 12 44,882.52 15b. The result is your current monthly income for the year for this part of the form.

Debtor 1

Debtor 2

Wells, Kenneth Robert & Wells, Veronica Arleen

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Mair Document Page 46 of 61

Debtor 1 Wells, Kenneth Robert & Wells, Veronica Arleen Case number (if known) Debtor 2 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 2 55.600.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17h Line 15b is more than line 16c. On the top of page 1 of this form, check box Disposable income is determined under 11 U.S.C. § 1325/b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 3,740.21 Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 3,740.21 19b. Subtract line 19a from line 18. 20. Calculate your current monthly income for the year. Follow these steps: 3,740.21 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 44,882.52 20b. The result is your current monthly income for the year for this part of the form 55,600.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sian Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Wells, Kenneth Robert X /s/ Wells, Veronica Arleen Kenneth Robert Wells Veronica Arleen Wells

Signature of Debtor 1

Date November 4, 2016

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

Signature of Debtor 2

Date November 4, 2016

MM / DD / YYYY

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Certificate Number: 15725-GAN-CC-028256102



CERTIFICATE OF COUNSELING

I CERTIFY that on October 24, 2016, at 8:17 o'clock PM EDT, Kenneth Wells received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Georgia, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	October 24, 2010	Бу:	/s/Kasui Siiaoazz
		Name:	Rasul Shabazz

Title:

/a/Dagual Chalage

Issuer

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 15725-GAN-CC-028256103



CERTIFICATE OF COUNSELING

I CERTIFY that on October 24, 2016, at 8:17 o'clock PM EDT, Veronica Wells received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Georgia, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: October 24, 2016

By: /s/Rasul Shabazz

Name: Rasul Shabazz

Title:

Issuer

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 53 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia, Rome Division

In	Wells, Kenneth Robert & Wells, Veronica Arleen Debtor(s)	Case No. Chapter	13
		_	
	DISCLOSURE OF COMPENSATION OF ATT	ORNEY FOR L	DEBIOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attemperation paid to me within one year before the filing of the petition in bankrupt be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankrupt.	cy, or agreed to be pai	d to me, for services rendered or to
	For legal services, I have agreed to accept	\$	3,500.00
	Prior to the filing of this statement I have received		0.00
	Balance Due	\$	3,500.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other personant.	on unless they are mer	nbers and associates of my law
	☐ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing in the copy of the agreement.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all asp	ects of the bankruptcy	case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in ob. Preparation and filing of any petition, schedules, statement of affairs and plan who. Representation of the debtor at the meeting of creditors and confirmation hearing. d. [Other provisions as needed] Debtor's attorney has received \$0 towards the base fee agreed under the case be dismissed prior to confirmation of the plan, the bala adjustments for payments under 11 U.S.C. 1326 (a)(1)(B) or (C) at Debtors' attorney up to \$2,000. Any balance above \$2,000 shall application. Should the case be dismissed after confirmation, the funds held the full remaining base fee. In the event of a Converted provided the confirmation of the plan, Debtors hereby direct the Chapter balance of the base fee. Should the current case be converted provided to the plan that the pla	ich may be required; and any adjourned he upon by Debtors an ince of the funds he and administrative to be requested by De ne Trustee shall par version: Should the r 13 Trustee to pay prior to confirmatio	arings thereof; ad Debtors' attorney. Should eld by the Trustee, after fees, shall be paid to ebtors' attorney through a fee y to Debtors' attorney from e current case be converted Debtors' attroney the n, Debtors hereby direct the

copy of the Rights and Responsibilities Statement which is referenced in General Order No. 6-2006 and 18-2015

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

has been provided to, and discussed with the Debtors.

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 54 of 61

In re	Wells, Kenneth Robert & Wells, Veronica Arleen	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

(Continuation Sheet)

	CERTIFICATION
I certify that the foregoing is a complete statem this bankruptcy proceeding.	nent of any agreement or arrangement for payment to me for representation of the debtor(s) in
November 4, 2016	/s/ Rob Rickman
Date	Rob Rickman
	Signature of Attorney
	Rob Rickman
	1755 North Brown Rd Suite 200
	Lawrenceville, GA 30043
	rob@thegeorgialawfirm.com
	Name of law firm

Case 16-42676-pwb Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 55 of 61 United States Bankruptcy Court Northern District of Georgia, Rome Division

IN RE:		Case No
Wells, Kenneth Robert & Wells, Ver	onica Arleen	Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR MA	ATRIX
The above named debtor(s) hereby	verify(ies) that the attached matrix listing cred	ditors is true to the best of my(our) knowledge.
Date: November 4, 2016	Signature: /s/ Wells, Kenneth Robert	
	Wells, Kenneth Robert	Debtor
Date: November 4, 2016	Signature: /s/ Wells, Veronica Arleen	
·	Wells, Veronica Arleen	Joint Debtor, if any

Ally Financial PO Box 380901 Minneapolis, MN 55438-0901

American Honda Finance PO Box 1027 Alpharetta, GA 30009-1027

Bank of America PO Box 982235 El Paso, TX 79998-2235

Capital One Bank PO Box 30281 Salt Lake City, UT 84130-0281

Chase Bank USA, NA PO Box 15298 Wilmington, DE 19850-5298

Citicards/CBNA PO Box 6241 Sioux Falls, SD 57117-6241

Columbus Bank & Trust 1148 Broadway Columbus, GA 31901-2429 Comenity Capital/HSN PO Box 182120 Columbus, OH 43218-2120

Discover Bank PO Box 15316 Wilmington, DE 19850-5316

Discover Personal Loans PO Box 30954 Salt Lake City, UT 84130-0954

First National Bank of Omaha 1620 Dodge St Omaha, NE 68102-1593

GMAC Mortgage 3451 Hammond Ave Waterloo, IA 50702-5345

Nationstar Mortgage, LLC PO Box 650783 Dallas, TX 75265-0783

Ocwen Loan Servicing, LLC 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409-6493 Office Depot/CBNA PO Box 6283 Sioux Falls, SD 57117-6283

RMB 409 Bearden Park Cir Knoxville, TN 37919-7448

Sears/CBNA PO Box 6283 Sioux Falls, SD 57117-6283

SunTrust Bank PO Box 85024 Richmond, VA 23285-5024

Syncb/Brandsmart PO Box 965036 Orlando, FL 32896-5036

Syncb/Evine PO Box 965007 Orlando, FL 32896-5007

Syncb/Lowes
PO Box 965028
Orlando, FL 32896-5028

Syncb/Rooms To Go PO Box 965028 Orlando, FL 32896-5028

The Home Depot/CBNA PO Box 6282 Sioux Falls, SD 57117-6282

Tractor Supply/CBNA PO Box 6283 Sioux Falls, SD 57117-6283

Wells Fargo Dealer Services PO Box 19657 Irvine, CA 92623-9657 $\underset{B201B\ (Form\ 201B)}{\textbf{Case}}\ \underline{\textbf{16-42676-pwb}}$

Doc 1 Filed 11/04/16 Entered 11/04/16 15:29:54 Desc Main Document Page 60 of 61

United States Bankruptcy Court Northern District of Georgia, Rome Division

IN RE:	Case No.
Wells, Kenneth Robert & Wells, Veronica Arleen Debtor(s)	Chapter 13
CERTIFICATION OF NOTICE TO CONSU UNDER § 342(b) OF THE BANKRUI	` '
Certificate of [Non-Attorney] Bankruptcy	Petition Preparer
I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, her notice, as required by § 342(b) of the Bankruptcy Code.	eby certify that I delivered to the debtor the attached
Printed Name and title, if any, of Bankruptcy Petition Preparer Address:	Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.)
X	(Required by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer of officer, principal, responsible person partner whose Social Security number is provided above.	or
Certificate of the Debtor	

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Signature of Debtor	Date
X /s/ Wells, Veronica Arleen	11/04/2016
Signature of Joint Debtor (if any)	Date
	X /s/ Wells, Veronica Arleen

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Document Page 61 of 61

United States Bankruptcy Court

Northern District of Georgia, Rome Division Case 16-42676-pwb

IN RE:		Case No.	
Wells, Kenneth Robert & Wells, Veronica	a Arleen	Chapter 13	
	ebtor(s)		
		RY CONCERNING PETITION, SCHEDULES, ATEMENT OF FINANCIAL AFFAIRS	
Each of the undersigned declares under pen	alty of perjury —		
(1) My attorney is filing on my behalf			
	the original of or check applied		
the following papers in the United States Ba to be filed simultaneously with this Declara	nkruptcy Court for the No	rthern District of Georgia (check applicable box for papers that are	
* Petition		✓ Schedule F	
List of all Creditors		✓ Schedule G	
* List of 20 largest creditor		✓ Schedule H	
Schedule A		▼ Schedule I	
Schedule B		Schedule J	
Schedule C		* Declarations Concerning Debtor's Schedules	
Schedule D		* Statement of Financial Affairs	
Schedule E			
(2) that I have read each of the documents of	lescribed above;		
(3) that with respect to each document descrito or part of such document; and	ibed above marked with ar	a asterisk, I signed the Declaration under penalty of perjury attached	
(4) that when I signed this Declaration, the	foregoing documents were	e not blank or partially complete; and	
(5) that the information provided in the abo	ve documents is true and	correct to the best of my knowledge, information and belief.	
Data de Navambar A 2046	Ciamatana.	/a/IMalla Warmath Dahaut	
Dated: November 4, 2016	Signature: Type or Print Name:	/s/ Wells, Kenneth Robert Wells, Kenneth Robert	
	Type of Fillit Name.	wens, Rennem Robert	
	Signature:	/s/ Wells, Veronica Arleen	
	Type or Print Name:	Wells, Veronica Arleen	
	Type of Time (wine)	(If Joint Debtors, Both Must Sign)	
	Attorney's Ce	rtification	
agent of the Debtor) will have signed this for in the documents referred to above after th	orm and the documents ref e Debtor(s) (or authorized cuments and the foregoing	ert that: (1) the Debtor(s)(or, if the Debtor is an entity, an authorized terred to above before I file them; (2) no material change was made d agent) read and signed the final paper copy of those documents, Declaration; and (3) those documents are the documents filed with	
Dated: November 4, 2016		/s/ Rob Rickman	
·	Type or Print Name:	Rob Rickman	

Bar Number: **604674**